

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Eduardo Balderas
 P.O. Box 422003
 Del Rio, TX 78842
 DR-23-CV-35/ doc. #: 112, 113, & 114



9590 9402 6289 0274 0459 86

2. Article Number (Transfer from service label)

7022 0410 0002 9924 8767

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

FILED02/21/24 FEB 26 2024
 Processed by Austin

CLERK, U.S. DISTRICT CLERK

WESTERN DISTRICT OF TEXAS

3. Service Type

<input type="checkbox"/> Adult Signature	<input checked="" type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input checked="" type="checkbox"/> Certified Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt